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Pro Se 15 (Rev. 12/16) Complaint for Violation of Civil Rights (Non-Prisoner)

with the full list of names. Do not include addresses here.)

MIPP

UNITED STATES DISTRICT COURT for the

District	of
	Division
HERBERT L. BSEDHTT }	Case No. 2:21-CV-25
Plaintiff(s) (Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional	(to be filled in by the Clerk's Office) Jury Trial: (check one) Yes No
page with the full list of names.) PLANET FITUES ASSETCOLLO	RECEIVED
Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page	JAN - 7 202 1 CLERK, U.S. DISTRICT COURT WEST. DIST. OF PENNSYLVANIA

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Non-Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

The	e Parties to This Complaint	
A.	The Plaintiff(s)	
	Provide the information below for	or each plaintiff named in the complaint. Attach additional pages if
	needed.	Was -1 To WIF
	Name	TEKBERI L.JOSEPH
	Address	H32 PANULUDO JOAD
		City, State Zip Code
	County	ALIRGHAN
	Telephone Number	(HI2) 381-7371
	E-Mail Address	netert Loseph 115 ag mm2-c
В.	The Defendant(s)	
	include the person's job or title (y, an organization, or a corporation. For an individual defendant, (if known) and check whether you are bringing this complaint against or official capacity, or both. Attach additional pages if needed. Thus House for the State
	E-Mail Address (if known)	Individual capacity Official capacity
	Defendant No. 2	
	Name	\
	Job or Title (if known)	
	Address	•
		City State Zip Code
	County	

Individual capacity

E-Mail Address (if known)

Official capacity

Pro Se 15	(Rev. 12/16	6) Complaint for Violation of Civil Rights (Non-	Prisoner)		
		Defendant No. 3			
		Name			
		Job or Title (if known)			
		Address			
			City	State	Zip Code
		County			
		Telephone Number			
		E-Mail Address (if known)			
			Individual capacity	Official capaci	ty
		Defendant No. 4			
		Name			
		Job or Title (if known)			
		Address			
			City	State	Zip Code
		County			
		Telephone Number			
	~	E-Mail Address (if known)			
			Individual capacity	Official capaci	ty
II.	Basis fo	or Jurisdiction		•	
	immuni Federa	42 U.S.C. § 1983, you may sue state ities secured by the Constitution and <i>l Bureau of Narcotics</i> , 403 U.S. 388 attional rights.	l [federal laws]." Under Biv	vens v. Six Unknown I	Vamed Agents of
,	.Δ	Are you bringing suit against (check	call that apply):		
1	A. Are you bringing suit against (check all that apply):				
\mathbb{N}	Federal officials (a Bivens claim)				
/	State or local officials (a § 1983 claim)				
/	В.	Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?			
				T	
	C.	Plaintiffs suing under <i>Bivens</i> may are suing under <i>Bivens</i> , what const officials?	only recover for the violatio itutional right(s) do you cla	n of certain constituti im is/are being violate	onal rights. If you ed by federal

Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under Bivens, explain how each defendant acted under color of federal law. Attach additional pages if needed.

CASE AT PHRC # 201803599 = III.

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. Where did the events giving rise to your claim(s) occur? ON May 16,2019 Defendant
BUICTED PLANNIFF from factify at 13500 Nocument VIEW DRIET Folkers
his compliant of being hardsed while Norther in Changing stall by mother
PATION. South PATION was A LARGE (TALL) Burky white rate who focused
Over Planatoff white latter was narrow reperfedly demoderne how
much more time he record in that 3 tall, whech he desired to
My 16, 2019 - See ATTACHED POLICE ROPERTO C mism baship caucal ATW WITH Lit

What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? C. Was anyone else involved? Who else saw what happened?) DEFENDING FMURB to Hotel Plmint Rights within its facility evincts volition violation violation violation violation violation violation of the CALRICATE Actor an Animus of RACIAL Defendants Actions evinct an Animus of RACIAL Products VIVLATURE OF the CIUL Rights Actor 1964.

THERE WEENO OTHER KNOWN WITNESSES TO THE

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive. @ MENTALDUNESS RESULTING From Defendant'S VIOLATIVE ACTIONS AGRINST PLANNTIPPS CIVIL RISK Through in Uts 16HT resulting From Non-access to Defendants)

Gym Fricelities. (See Attrached on rembership Connellation of Report Annorate

UNTOLD (perhaps a billion do Ilres) Millions of delloss for ENDERTAINMENT

UNTOLD (perhaps a billion do Ilres) Millions of delloss for ENDERTAINMENT REvenues generated by Plant 1885 VOLDE SOUTH Brown Styk 11 Dancing and related 1 times for SALE IN INTERS GATE Commerce depicting TRADEMARKED LOGO FOR J. N. LIMOUSINE. TRESSIUN developed from PETERDANT'S imposition of TIVE MEASURES agrants CWILLIGHTS. v. Relief State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims. INDAMAGES 1,000,000,000 ACTUAL KERSOMBLE SOM "(a) \$ H32,000,000: CACTUAL

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing:	swary 7, 2020
	Signature of Plaintiff Printed Name of Plaintiff	Stabol Atwest I
В.	For Attorneys Pro Sl	
	Date of signing:	weary 7,2020
	Signature of Attorney Mand	tintif Lebo LJwept#
	Printed Name of Attorney	HERBERTO L-JOSEPH IT
	Bar Number A-	
	Name of Law Firm	
	Address	432 PARGUOON ROM
		October L. Kennsylv AN'IN 15210 State Zip Code
	Telephone Number	OFF (4B) 381-7321 FM-4121381-5466
	E-mail Address	herbert IJoseph 115 a gmril-com